

HIGHLAND HEALTH CARE

2997 ST. ANTHONY DRIVE

GREEN BAY 54311

Phone: (920) 468-0734

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 48

Total Licensed Bed Capacity (12/31/03): 48

Number of Residents on 12/31/03: 28

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 32

Corporation

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		7.1
Supp. Home Care-Personal Care	No					1 - 4 Years		50.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	28.6	More Than 4 Years		17.9
Day Services	No	Mental Illness (Org./Psy)	60.7	65 - 74	10.7			----
Respite Care	No	Mental Illness (Other)	3.6	75 - 84	35.7			75.0
Adult Day Care	No	Alcohol & Other Drug Abuse	3.6	85 - 94	25.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	7.1		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	3.6	65 & Over	71.4	-----		
Transportation	No	Cerebrovascular	7.1		-----	RNs		11.3
Referral Service	No	Diabetes	3.6	Gender	%	LPNs		10.1
Other Services	Yes	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	10.7	Male	39.3	Aides, & Orderlies		
Mentally Ill	No		----	Female	60.7			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	1	100.0	220	18	75.0	126	0	0.0	0	2	100.0	153	0	0.0	0	1	100.0	225	78.6
Intermediate	---	---	---	6	25.0	105	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	6	21.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	1	100.0		24	100.0		0	0.0		2	100.0		0	0.0		1	100.0	28	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	12.1	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	3.6	64.3	32.1	28
Other Nursing Homes	1.7	Dressing	14.3	64.3	21.4	28
Acute Care Hospitals	77.6	Transferring	39.3	32.1	28.6	28
Psych. Hosp.-MR/DD Facilities	3.4	Toilet Use	17.9	50.0	32.1	28
Rehabilitation Hospitals	1.7	Eating	32.1	50.0	17.9	28
Other Locations	3.4	*****				
Total Number of Admissions	58	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	3.6	Receiving Respiratory Care		0.0
Private Home/No Home Health	30.3	Occ/Freq. Incontinent of Bladder	67.9	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	6.1	Occ/Freq. Incontinent of Bowel	53.6	Receiving Suctioning		0.0
Other Nursing Homes	15.2			Receiving Ostomy Care		0.0
Acute Care Hospitals	12.1	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		35.7
Rehabilitation Hospitals	0.0					
Other Locations	12.1	Skin Care		Other Resident Characteristics		
Deaths	24.2	With Pressure Sores	3.6	Have Advance Directives		71.4
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	66			Receiving Psychoactive Drugs		42.9

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: Under 50 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	62.0	86.2	0.72	84.7	0.73	88.1	0.70	87.4	0.71
Current Residents from In-County	67.9	78.5	0.86	77.5	0.88	82.1	0.83	76.7	0.88
Admissions from In-County, Still Residing	5.2	17.5	0.30	25.1	0.21	20.1	0.26	19.6	0.26
Admissions/Average Daily Census	181.3	195.4	0.93	104.2	1.74	155.7	1.16	141.3	1.28
Discharges/Average Daily Census	206.3	193.0	1.07	107.9	1.91	155.1	1.33	142.5	1.45
Discharges To Private Residence/Average Daily Census	75.0	87.0	0.86	28.9	2.59	68.7	1.09	61.6	1.22
Residents Receiving Skilled Care	78.6	94.4	0.83	93.8	0.84	94.0	0.84	88.1	0.89
Residents Aged 65 and Older	71.4	92.3	0.77	95.8	0.75	92.0	0.78	87.8	0.81
Title 19 (Medicaid) Funded Residents	85.7	60.6	1.42	56.9	1.51	61.7	1.39	65.9	1.30
Private Pay Funded Residents	7.1	20.9	0.34	33.8	0.21	23.7	0.30	21.0	0.34
Developmentally Disabled Residents	0.0	0.8	0.00	1.4	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	64.3	28.7	2.24	38.3	1.68	35.8	1.79	33.6	1.91
General Medical Service Residents	10.7	24.5	0.44	16.9	0.63	23.1	0.46	20.6	0.52
Impaired ADL (Mean)	52.9	49.1	1.08	50.8	1.04	49.5	1.07	49.4	1.07
Psychological Problems	42.9	54.2	0.79	56.3	0.76	58.2	0.74	57.4	0.75
Nursing Care Required (Mean)	4.9	6.8	0.72	6.9	0.71	6.9	0.71	7.3	0.67